

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 741439-11
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <p style="text-align: center; margin: 0;">CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]</p> <p style="margin: 5px 0;">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO</p> <p style="margin: 5px 0;">Signature: _____</p> <p style="margin: 5px 0;">Name: _____</p> </div> <div style="width: 70%;"> <p style="margin: 0;">In re Application of Oliver <b>BOHNENBERGER</b></p> <hr/> <div style="display: flex; justify-content: space-between; margin: 0;"> <span>Application Number 10/705,237</span> <span>Filed 11/12/03</span> </div> <p style="margin: 0;">For MARKET DATA PROCESSING SYSTEM AND METHOD</p> <hr/> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p style="margin: 0;">Group Art Unit 3694</p> </div> <div style="width: 40%;"> <p style="margin: 0;">Examiner Gerald C. Vizvary</p> </div> </div> </div> </div>		
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows (check time period desired):</p> <div style="margin-top: 10px;"> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 80%;"> <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)           <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$230/\$460)           <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$525/\$1050)           <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$820/\$1640)           <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1115/\$2230)         </div> <div style="width: 20%; text-align: right;">           \$ _____            \$ <u>460.00</u>            \$ _____            \$ _____            \$ _____         </div> </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Applicant claims small entity status.  <input type="checkbox"/> A check to cover the fee is enclosed.  <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.  <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380</u> I have enclosed a duplicate copy of this sheet.         </div> <p style="margin-top: 10px;"><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> </div>		
<p>I am the <input type="checkbox"/> applicant/inventor</p> <div style="margin-left: 40px;"> <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.          Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).       </div> <div style="margin-left: 40px;"> <input checked="" type="checkbox"/> attorney or agent of record.  <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a).          Registration number if acting under 37 CFR 1.34(a) 50,219       </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 55%;"> <p style="text-align: center;">_____ /Marc W. Butler, Reg. No. 50,219/ Signature</p> <p style="text-align: center;">_____ Marc W. Butler Typed or printed name</p> </div> <div style="width: 40%; text-align: center;"> <p>_____ May 1, 2008 Date</p> <p>_____ 202-585-8000 Telephone Number</p> </div> </div>		
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>		
<input type="checkbox"/> Total of _____ forms are submitted.		